

MILLS COUNTY
P.O. BOX 483
GOLDTHWAITE, TX 76844
325-648-2222
325-648-2806 fax

PERMIT PROCEDURE FOR ON-SITE SEWAGE FACILITY:

****ALL pages in packet MUST be filled out completely****
“SEE ATTACHED” WILL NOT BE ACCEPTED

- ___ Obtain an application from Mills County Judge’s Office.
- ___ Have appropriate individual (Registered Sanitarian, Professional Engineer, or Licensed Installer) perform mandatory soil identification procedure.
- ___ Have appropriate individual prepare planning materials. Professional design (R.S., P.E.) is required for proprietary and non-standard systems.
- ___ Submit **completed** application and technical information sheet (in property owner’s name) **with all pages intact**. Include the appropriate fee for permit **\$210.00** and **copy of legal description** from deed of property – may obtain through Clerk’s office.
- ___ Plans and application will be reviewed by county staff.
- ___ Upon approval an Authorization to Construct will be issued. The Authorization to Construct is valid for one year from the date of issuance. After one year, a new application and fees are required.
- ___ Begin construction. Inspection is required **BEFORE** covering of the system. Contact county inspector at least **5 working days** in advance to arrange for the inspection.

GENERAL INFORMATION:

****AS OF 7-27-09 PERMIT REQUIRED REGARDLESS OF ACREAGE****

1. **Mills County Inspector, Al Hamrick 325-372-7908**
2. No refund of any amount will be granted.
3. Inspection Fee is included in the permit fee.
4. A **re-inspection fee** equal to ½ the permit amount must be **paid by the installer** for each time the system must be re-inspected. All fees must be paid before a Notice of Approval will be issued.

MILLS COUNTY
ON-SITE SEWAGE FACILITY
TECHNICAL INFORMATION FOR PERMIT

APPLICATION # _____

DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL.
UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR
ADMINISTRATIVE PENALTIES.

Owner's Name: _____ County _____

Professional design required? ____ Yes ____ No

If yes, professional design attached? ____ Yes ____ No

1. Sewer (House drain): Type and size of pipe: _____
Slope of sewer pipe to tank: _____

2. Daily Wastewater usage rate: $Q =$ _____ (gallons per day)
Water saving devices: ____ Yes ____ No

3. Treatment Unit:

a. ____ Septic Tank - Tank dimensions _____ Liquid depth _____
Size required _____ Size Proposed _____

b. ____ Aerobic – Manufacturer: _____ Model # _____
Size required _____ Size Proposed _____

c. ____ Other: _____
(Please attach description.)

4. Disposal System: Type _____
Area Required: _____ Area Proposed _____

5. Additional Information (**Note – This information must be attached for review to be completed.**)

- a. **Site Evaluation**
- b. **Planning Materials**

Designer's Signature

Registration No.

Date

Date: _____

Application No.: _____

Applicant Information:

Site Evaluator Information:

Name: _____

Name: _____

Address: _____

Company _____

City: _____ State _____

Address: _____

Zip _____ Phone: _____

City: _____ State _____

Zip Code: _____ Phone: _____

Property Location:

Installer Information:

Lot _____ Block _____ Subdivision _____

Name: _____

Address: _____

Company: _____

City _____ State _____

Address: _____

County: _____

City: _____

Unincorporated Area? ___Yes ___No

Zip Code: _____ Phone _____

Schematic of Lot or Tract

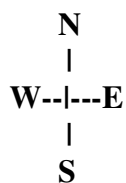
Show:

- Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines, and other structures where known.
- Location of existing or proposed water wells within 150 feet of property
- Indicate slope or provide contour lines from the structure to the farthest location of the proposed soil absorption irrigation area.
- Location of soil borings or dug pits (show location with respect to a known reference point.)
- Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundment areas, cut or fill blank, sharp slopes and breaks.

Lot Size: _____Acres

Site Drawing
Scale: 1 inch = 50 ft.

Compass
North



**SKETCH MUST BE DRAWN TO SCALE & SHOW LOCATION OF
SOIL SAMPLE POINTS OF SOIL ANALYSIS.**

Features of Site Area

Presence of 100-year flood zone? Yes No
Presence of upper water shed? Yes No
Presence of adjacent ponds, streams, water impoundments? Yes No
Existing or proposed water well in nearby area ? Yes No
Organized sewage service available to lot or tract ? Yes No

Site Evaluator: _____ Signature: _____
License No.: _____ Date: _____

OSSF SOIL EVALUATION

Date Performed: _____

Property Location: _____

Proposed Excavation Depth: _____

Requirements:

1. At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.
2. Locations of soil boring or dug pits must be shown on this site drawing.
3. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.
4. Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

Soil Boring Number:

Depth (Feet)	Textural Class	Structure (is applicable)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

Soil Boring Number:

Depth (Feet)	Textural Class	Structure (is applicable)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

Signature of Site Evaluator

License #

Date

**MILLS COUNTY
AUTHORIZATION TO CONSTRUCT
AN ON-SITE SEWAGE FACILITY**

Application # _____

Property Owner _____

Mailing Address _____

Property Location _____

This serves to notify all persons that an on-site sewage facility application, related technical data, and the appropriate fees have been received by Mills County from the property owner. The application has been reviewed for technical and administrative consideration against the standards set forth by Mills County. Approval is hereby granted for the construction as shown on the submitted plans.

Any modifications to submitted plans require approval by Mills County On-Site Sewage Agent prior to installation.

You or your installer must contact **Al Hamrick**, Mills County On-Site Sewage Inspector, **325-372-7908** prior to completion to arrange the required facility inspection. The authorization to construct is valid for one year from the date of issue. If a final inspection has not been performed within one year of issue, a new application and fee will be required.

Comments: _____

Al Hamrick, Septic System Inspector
License #0S0028464

Date

COUNTY OF MILLS
Office of Septic Systems Inspector
P.O. Box 483
Goldthwaite, TX 76844
325-648-2222

Permit # _____

NOTICE OF APPROVAL OF AN ON-SITE SEWAGE FACILITY

Property Owner _____

Mailing Address _____

Property Location _____

This Serves to notify all persons that the On-Site Sewage Facility owned by the above has satisfied design, construction, and installation requirements of the Texas Commission on Environmental Quality (TCEQ). This On-Site Sewage Facility (OSSF) permit is issued for the operation of the above-identified OSSF.

COMMENTS: _____

ANY ALTERATION, EXTENSIONS, OR REPAIRS TO THE OSSF WILL REQUIRE A NEW PERMIT. The owner must notify this office of the aforementioned changes.

If you have any questions, or if we may be of assistance to you, please contact our office at 325-648-2222.

Al Hamrick, Septic System Inspector
License # OS0028464

Date